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CONFIRMATION NO. 5778

<b>SERIAL NUMBER</b> 09/375,906	<b>FILING OR 371(c) DATE</b> 08/17/1999 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2684	<b>ATTORNEY DOCKET NO.</b> 15689.48
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## APPLICANTS

SADAYUKI ABETA, KANAGAWA, JAPAN;  
MAMORU SAWAHASHI, KANAGAWA, JAPAN;  
FUMIYUKI ADACHI, KANAGAWA, JAPAN;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of PCT/JP98/05727 12/17/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 349,609/1997 12/18/1997

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/02/1999

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged	Examiner's Signature <i>W. B. Smith</i>	Initials <i>W</i>		

## ADDRESS

022913

## TITLE

CHANNEL ESTIMATION UNIT, AND CDMA RECEIVER AND CDMA TRANSCEIVER WITH CHANNEL  
ESTIMATION UNIT

<b>FILING FEE RECEIVED</b> 1162	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/375,906 . . .	08/17/99	370	2731	.3815/83

APPLICANT  
 SADAYUKI ABETA, KANAGAWA, JAPAN; MAMORU SAWAHASHI, KANAGAWA, JAPAN;  
 FUMIYUKI ADACHI, KANAGAWA, JAPAN.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
 VERIFIED

none

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A 371 OF PCT/JP98/05727 12/17/98

QS

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED JAPAN 349,609,1997 12/18/97

QS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 09/02/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>Alan H. Miller</u> Examiner's Initials	JPX	12	14	6

ADDRESS  
 BROWN RAYSMAN MILLSTEIN FELDER  
 & STEINER LLP  
 120 WEST 45TH STREET  
 NEW YORK NY 10036

TITLE  
 CHANNEL ESTIMATION UNIT, AND CDMA RECEIVER AND CDMA TRANSCEIVER WITH  
 CHANNEL ESTIMATION UNIT

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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<b>SERIAL NUMBER</b> 09/375,906	<b>FILING DATE</b> 08/17/1999 <b>RULE</b> -	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2731	<b>ATTORNEY DOCKET NO.</b> 3815/83
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**\*\* CONTINUING DATA \*\*\*\*\***  
 THIS APPLICATION IS A 371 OF PCT/JP98/05727 12/17/1998 *10*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 JAPAN 349,609/1997 12/18/1997 *10*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
**\*\* 09/02/1999**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Don Perth</i> Examiner's Signature	<i>AL</i> Initials			

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 CHANNEL ESTIMATION UNIT, AND CDMA RECEIVER AND CDMA TRANSCEIVER WITH CHANNEL ESTIMATION UNIT

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